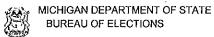


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Department has facilities from a secretar distriction	at a table and the co	A T. I. O. I.		
Report must be legible, typed or printed in ink an the treasurer (or designated record keeper) and or	d signed by candidate.	3. This Statement covers:	om 07/22/14 to (08/25/14
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
150695		Badgerow	Randali	Ĺ
f I		4a. Office Sought Including Di	•	(If applicable)
2. Committee Name		5th District Bay Cour	nty Commissioner	
Friends of Randy Badge	erow	4b. County of Residence BAY		
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ential Address	
613 30th St		Randy Badgerow		
Bay City, MI 48708		613 30th St		
		Bay City, MI 48708		
Area Code and Phone If the address in this box is different from the commalling address on the Statement of Organization, be sent to this address by the filing official.		Area Code & Phone (989) 3		
7. Treasurer's Business Address		B. Designated Record Keeper Designated Record Keeper)	's Name and Mailing Address	GO PERONE
509 Center Ave		Susan Badgerow	1	병 호텔
Bay City, MI 48708		613 30th St	\$2	w tree
		Bay City, MI 48708		
			7 0	7 음악
		(080)	971-0058	No impos
Area Code and Phone		Area Code and Phone (909	9e. Dissolution of Candida	Atè Committee
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:	Required ON is not on the current year:		By checking this item I/V by the committee to the cand by discharged and forgiven a the committee. The committee	We certify any outstanding debt didate or his or her spouse is here and no longer collectible from ee has no outstanding assets,
P rimary	Jouny Quart	any	owes no lates fees or has any	outstanding debt.
General	October Q	arterly	Further, if the dissolution can	not be granted, that this he
Convention			Further, if the dissolution can considered a request for the I	Reporting Waiver.
Special	9c. 🗀			
School	Annual L	Statement () Coverage Year	Effective date of di	ssolution
	Ameno	Iment to Campaign Statement		····
Caucus	(Comp	lete Item 9a, 9b, 9c or 9e to e which Statement is being	Note: The disposition of resid Schedule 1B and the Summa	lual funds must be reported on ary Page.
Date of Election, Convention or Caucus				
08/05/14				
				
10. Verification: IVWe certify that all reasonable dilige mylour knowledge and belief the contents are true, a	nce was used in occurate and con	n the preparation of this stateme inplete.	nt and attached schedules (if	any) and to the best of
Current Treasurer or Randall Badge	erow	, Endul Br	depert.)	9/3/2014
Designated Record Keeper Type or Print Name		Signature CE	Date .	
Candidate Randy Badgerow		Randy B	anyers Date .	9/3/2014
Type or Print Name		Signature	U Date	

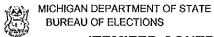


ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

2. Committee Name	Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 07/29/14 Name & Address:		
Susan A. Mosher 2136 Second St Bay City, MI 48708	_§ 25	_§ 25
5. If over \$100.00 cumulative, please provide:	Click Here t	for Memo Itemization
Occupation Employer	-	or Memo Remization
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/30/14 Name & Address		
Susan Badgerow 613 30th St Bay City, MI 48708	_{\$} 50	ş 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/25/14 Name & Address:		
Randy Badgerow 613 30th St Bay City, MI 48708	_{\$} 75	. \$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct V Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/30/14 Name & Address	_	
Randy Badgerow 613 30th St Bay City, MI 48708 5. If over \$100.00 cumulative, please provide:	§ 40	\$ Memo Itemization
Occupation Employer	- Olick Hele loi	Wello Remization
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	tal man an	
Grand Total of All Schedules 1. (Complete on last page of Schedul		
Page of	Page.	



-149

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee f.D. Number

150695

2. Committee Name Friends of Randy Badgerow

middle initial. Check b	ox to indicate if co	contribution is from an individual ntribution is from a Political Com gregardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt:	YES 4. Date of Re	celpt 08/19/14	_	
Jane Mosher					
613 30th St				_{\$} 900	ູ 900
Bay City, MI 487	708			\$ 900	<u> </u>
5. If over \$100.00 cum	ulative, please pr	ovide:		Click Here	for Memo Itemization
Occupation Retired		Employer		SHORTIONS	ior momo nomization
Business Address					
Type of Contribution:	✓ Direct	Loan from a person	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date of Rec	eipt		
Name & Address		_		::	
:				1	
				\$	_
5. If over \$100.00 cum	ulative, please pro			Click Here f	or Memo Itemization
Occupation		_ Employer	····		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of Rec	ceipt	_	
				\$	- \$ <u> </u>
- 12			t.	Click Here fo	r Memo Itemization
5. If over \$100.00 cumu					
Occupation		_ Employer			
Business Address	Direct	Г Т			
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of Red	ceipt (1811)	-	
				\$	ę
5. If over \$100.00 cumu	ılative, please pro	vide:		Click Horo fo	r Memo Itemization
Occupation		_ Employer		Click Here to	Memo Remization
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtota	\$900.00	
			rand Total of All Schedules 1/]
Page 2 of 2		(Com	plete on last page of Schedule	Enter this total on line 3a of Summary Page.	_



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

150695

OANDIDATE COMMINITEE	2. Committee Name Friends of Randy Bad	gerow	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Klender Design		07/25/14	\$ - \$ 75
Address	Purpose: Magnetic signs	Date	
3791 Wilder Rd	011.1.1		
Bay City, MI 48706	! ,	ere for Mer	no Itemization Typ
Fund Ralser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
fame Cartridge World		08/08/14	\$ 65.72
Address	Purpose: Ink cartridges for printing pamphlets	Date	7 00.72
206 N. Euclid			
Bay City, MI 48706	Click He	ere for Mem	o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name Lamar Companies		08/25/14	
ddress	Purpose: Billboard	Date	\$ 867
0100 Thor Dr	Purpose:	Date	
reeland, MI 48623	Click Her	e for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
xpenditure #4	statement		
ame			
ddress	Purpose;	Date	\$
A Comment of the Comm	Click Hero	for Mama	Homination T.
\frac{1}{2}	\ 	NITHERITO	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
penditure #5	statement		
me			
denna			•
dress	Purpose:	Date	\$
Fund Raiser	Click Here Check box if this expenditure is payment of debt or obligation reported on previous statement	for Memo II	temization Type
	Subtotal th	is page	\$1,007.72
	Grand Total of all Scher		\$1,007.72
	(Complete on last page of S	chadulal	Ψ 1.007./2

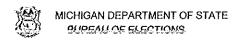
Enter this total on line 8a of Summary Page

DEB	TS	AND	OB	LIC	ЭA.	TIO	NS
	S	CHE	DUL	Ē	1E		

150605

	Committee I.D. Number 13008			
SCHEDULE 1E CANDIDATE COMMITTEE 2. C	Committee Name Friends of	Randy Badger	wc	
This Schoolide Memiron				
	nmittee OR b. Debts ck either a or b. Use only for the pur	and obligations owed <u>to</u> pose checked.)	or forgiven <u>by</u> the co	mmittee.
financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incomporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	(Description) 5. Indicate date debt was incurred 6. Indicate original amount or debt	each payment	payment to date on debt	Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes	4. Type: loan	§ 0.00		
Randy Badgerow 613 30th St Bay Cify MI 48708	5. <u>Date Debt Was Incurred</u> : 07/25/14 6. <u>Original Amount of Debt</u> : \$_75.00	\$ \$ \$	÷ _0.00	75.00
ir bank loan, name of engorser or guarantor:		An	nount Endorsed: \$	818 8 8 10 10 10
Debt #2 Corp? Yes Owed to or by:	4. Type: loan	\$ 0.00		
Bay City, MI U8708	5. <u>Date Debt Was Incurred:</u> 7/30/14 6. <u>Original Amount of Debt</u> : \$ 40.00	\$ \$ \$ \$	\$ 0.00	\$_40.00
If hank loan, name of andorser or guarantor:	— man agree Lang a distance and a many distance distance of a distance of the second s	<u>n est distribution autorialistic editario</u> 🤌	maunt Endoraad: 🗫	Proceedings of the State of the State of
Owed to or by: Yes Owed to or by:	4. Type:	\$ \$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$	
	19911) (Outstanding debt)	\$115.00
(Co A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during t		owing amounts owed by ount owed on It at the c		\$115.00 Enter this total on line 12a "owed by"" or line 12b "owed to" of the

Page 1 of 1



1. Committee I.D. Number 150695

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Friends of Randy Badgerow

-£3¢ \$6+± 5

CANDIDATE COMMITTEE	Z. Committee Hame	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		- Sumulative this decitor dycle
a. itemized (Schedule 1A - Column 6)	(3a.) \$ 1,090.00	-
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$1,090.00	(18.) \$ \$1,090.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$1,090.00	(20.) \$ \$1,090.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$ 0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,007.72	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$1,007.72	(23.) \$ \$1,007.72
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	-
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$115.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _\$0.00	
	BALANCE STATEMENT (13.) \$ \$0.00	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)		haterapp 4
Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$1,090.00	_
5. SUBTOTAL Add lines 13 and 14 6. Amount expended during reporting period	(15.) = \$ <u>\$</u> \$1,090.00	MANAGA
(Add lines 9 and 11)	(16.) - \$ \$1,007.72	
7. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$82.28	*